ing station building including extension of the building, air-conditioing of the proposed reservation complex . and washable aprons on platform No. 1 & 2. The amount to be spent in 1988-89, on providing these amenities i_s likely to be Rs. 52.94 lakhs. The future expenditure will depend on the work remaining and the availability of resources.

(c) Yes, Sir.

(d)

Name of station	Amount spent during the last 3 year
1. Howrah .	Rs. 190.34 lakhs
2. Sealdah .	Rs. 81.31 lakhs
3. Patna	Rs. 81.53 lakhs
4. Gaya	Rs. 48 77 lakhs
5. Jhansi	Rs. 40.00 lakhs
6. Bhopal	Rs. 54.67 lakhs
7 Jallandar City .	Rs. 44 52 lakhs
8. Mbradabad	Rs. 79.31 lakhs
9. Lucknow	Rs, 100.00 lakas
1 Ankleshwar	Rs. 63.25 lakhs

Installation of T.V. Sets in Superfast trains

1857. SHRI PRAMOB MAHAJAN: Will the Minister of RAILWAYS be pleased to state:

(a) whether it i_s a fact that a television set will be installer for the entertainment of passengers hi each compartment of superfast trains all over India;

(b) if so, what are the details thereof including time schedule and the $name_s$ of trains;

(c) whether Government are aw^re of the inconvenience it will cause to the passengers who are not interested in it; and

(d) if so, what is Government's reaction thereto?

THE DEPUTY MINISTER *m* THE MINISTRY- OF RAILWAYS (SHRI MAHABIR PRASAD), (a) to (d) The Railway Administrations have been asked to explore possibilities of introducing CCTV System in trains through private parties on specified conditions. Care shall be taken to avoid inconvenience to passengers be, fore deciding $_{0n}$ the modalities of operation of the CCTV System.

Antibiotic used for sexually transmitted diseases

1858. SHRI BEKAL UTSAHI:
DR. (SHRIMATI) SAROJTNI MAHISHI;

Will the Minister of HEALTH AND FAMILY WELFARE be pleased to refer to the answer to Unstarred Question No. 305 given in Rajya Sabha on 27th April, 1988 and. state:

(a) what are the names of the'Antibiotics which are used for control of STD;

(b) the names of other drugs required for treatment Of STD;

(c) the- names of other diseases for . which antibiotic are used along with names of each antibiotics and disease;

(d) whether it is a fact that mostly each drug is used for more than one disease but mainly for particular disease;

(e) whether Tetracycline Hcl, Hydrocortisone are not exclusively fo_r Malaria which were recommended for inclusion in category 1, if so, the reasons for which antibiotics were not recommended under STD; and

(f) what are the reasons that the Government had adopted different parameters foR identification of drugs and what is the policy IN this regard?

THE MINISTER OF HEALTH AND FAMILY WELFARE AND' THE MINISTER OF CIVIL AVIATION (SHRI MOTI LAL VORA): (a) and (b) Antibiotics used for treatment of STD are Tetracycline Erythromycin, Ampicillin, Pencillin and Streptro-mycin.

The other drugs required for treatment of STD are different Sulpha drugs.

(c) Antibiotics are used for a variety of bacterial infections.

(d) Yes, Sir.

(e) Tetracycline Hcl and Hydro-cortisone are principal drugs for the control of blindness, Paracetamol is principally an anti-pyretic drug to control high temperature normally associated with Malaria Antibiotics are used for anti-bacterial conditions other than STD also.

(f) Principal drugs used for the National Health Programmes have been recommended for inclusion in the Category I of the' Drugs Prices ContrqjL Order,

Transfer of the medico-legal cases from AHMS to Safdarjang Hospital

1859. PROF. SOURENDRA BHAT-TACHARJEE: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to 6tate:

(a) whether it is a fact that most of the medico legal cases falling under the jurisdiction of AIIMS are referred to by the institute to the Safdarjang Hospital i>n the pretext of shortage Of beds; and

(b) if so, what check is exercised since such *ad.hoc* transfers from one hospital to another deprive the patients of the prompt medical aid?

THE .MINISTER OF HEALTH AND FAM'LY WELFARE AND THE MINISTER OF CIVIL AVIATION (SHRI MOTI LAL VORA): (a) and (b) AH the medico legal cases falling under the jurisdiction of AIIMS are brought to AIIMS casualty and are promptly attended by the doctors and admitted as far as possible. Any patient in precarious condition is invariably admitted. However, ^vhen no bed is available, the attendants of the patients are advised to take the patients to another hospital for further treatment and hospitalisation. Only such patients are referred who are medically fit to travel after stabilisation and resuscitative treatment has been given to them.

Additional Remuneration for Performing; Post-mortem

1860. PROF. SOURENDRA BHAT-TACHARJEE: Will the Minister of HEALTH AND' FAMILY WELFARE be please^ to state:

(a) whether it i$ & fact that Doctors and other para-medical staff involved in post-mortem are given additional remuneration for post mortem in States like Madhya Pra-
' d/esh, Maharashtra, Goa, ietc[.;j arid

(b) if so, the reasons for non payment of the same benefits to the similar staff in Delhi hospitals?

THE MINISTER OF HEALTH AND FAMILY WELFARE AND' THE MINISTER OF CIVIL AVIATION (SHRI MOTI LAL VORA): (a) and (b) Health is a State subject. The doctors employe by the State. Government are governed by the terms and conditions of service of the respective State.